## AUTHORIZATION FOR USE OF FIRST-CLASS OR PREMIUM-CLASS OTHER THAN FIRST-CLASS (PCotFC) TRAVEL ACCOMMODATIONS

## INDIVIDUAL TRIP AUTHORIZATION

First-Class <sup>1</sup>	PCotFC	
	Please check authorization requested)	
ORGANIZATION:		
NAME:		
GRADE:	TITLE:	
TRIP ORIGIN:	TRIP DESTINA	TION:
COST: FIRST-CLASS/PCotFC: COACH FARE: ADDITIONAL COST:  JUSTIFICATION: See Page 2		
CARRIER (IF FOREIGN)		
Signature of Employee		
AUTHORIZED BY:	TITLE:	DATE:

RETU	RN				
O:					
		y			
		<del></del>			
USTI	FIC	CATION: Check appropriate box and provide brief explanation:			
1)		Regularly scheduled flights between the authorized origin and destination points provided only First-Class or PCotFC accommodations			
2)		No space is available in coach-class in time to accomplish the mission (Only PCotFC may be authorized)			
3)		Security Reasons			
4)		Inadequate Sanitation (Only PCotFC may be authorized)			
5)		Overall Cost Savings (Only PCotFC may be authorized)			
6)		Use of Frequent Flyer Benefits (Only PCotFC may be authorized)			
7)		Acceptance of Payment From a Nonfederal Source (Only PCotFC may be authorized)			
8)		Travel in Excess of 14 Hours (Only PCotFC may be authorized)			
9)		Agency Mission			
XPL	ANA	ATION:			